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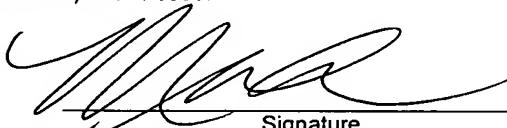
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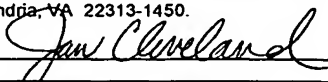
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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 60889/HO-P02894US010314005 | |
|  | In re Application of Per Andersson | | |
| | Application Number 10/715,897-Conf. #1386 | | Filed November 18, 2003 |
| | For MICROFLUIDIC DEVICE | | |
| | Art Unit 1743 | | Examiner D. K. Handy |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | | |
| The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) | | \$ 500.00 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | \$ | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 06-2375. I have enclosed a duplicate copy of this sheet. | | | |
| <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | | |
| I am the | | | |
| <input type="checkbox"/> applicant /inventor. | |  Signature Melissa W. Acosta Typed or printed name (214) 855-7163 Telephone number November 7, 2006 Date | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration number 45,872 | | | |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | |
| <input type="checkbox"/> *Total of 1 forms are submitted. | | | |

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| Notice of Appeal I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV568266685, on the date shown below in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | |
| Dated: November 7, 2006 | Signature:  (Jan Cleveland) |

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